

## APPENDIX A

**EFFECTIVE INSTRUCTIONAL LEADERSHIP ACT (EILA)  
JULY 1, 2006 – JUNE 30, 2007  
PROVIDER PROPOSAL FORM  
(See EILA Technical Assistance Manual, Page 3 for explanation)**

Email proposals to [KDEEILA@education.ky.gov](mailto:KDEEILA@education.ky.gov)

**Proposals must be submitted at least thirty (30) days prior to the first scheduled program to be reviewed for approval. Proposals submitted after training session has occurred will not be reviewed.**

**Program Name:**

**Name of Contact Person:**

**Address:**

**City:**

**State:**

**Zip:**

**Phone Number:**

**E-mail Address:**

**Number of Contact Hours Requested:**

**Intended Audience:**

☐

Superintendent

☐

Director of Special Education

☐

Supervisor of Instruction

☐

Principal

☐

Guidance Counselor

☐

Other

**Program Date (Date of first offering):**

**Program Description (50 words or less):**

**Identify Participants' Stage of Professional Development:**

☐

Orientation/Awareness (Developing initial knowledge and understanding)

☐

Preparation/Application (Developing skills to begin implementation)

☐

Implementation/Management (Mastering skills for performing or achieving the identified goals/objectives)

☐

Refinement/Innovation (Modifying for more effective application)

**Identify Standards and Indicators for School Improvement Addressed in Program Content (See page 9 of EILA Technical Assistance Manual):**

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Standard 1

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Standard 2

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Standard 3

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Standard 4

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Standard 5

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Standard 6

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Standard 7

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Standard 8

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Standard 9